

		HIV CASE MANAGEMENT FEE SCHEDULE		
		Provider Specialty 060		
		Taxonomy: 251B00000X		
			Medicaid Maximum Allowable	
CODE	MODIFIER	DESCRIPTION	FEE	EFFECTIVE DATE
G9012		Other specified case management services not elsewhere classified	12.96	7/1/2012
Providers should always bill their usual and customary charges.				
Please use the monthly NC Medicaid Bulletins for additions changes and deletion to this schedule.				